

PLEASE PRINT OR TYPE

Date/Time Filed

by: _____

**IN THE SUPERIOR COURT OF THE STATE OF ARIZONA
IN AND FOR THE COUNTY OF MARICOPA**

IN RE THE MARRIAGE OF:

SUPERIOR COURT NO. _____

Conciliation No. _____

(**YOUR** complete name) PETITIONER

and concerning

PETITION FOR CONCILIATION

(**SPOUSE'S** complete name) RESPONDENT

The PETITIONER in the above-titled cause respectfully represents to the Judge of Conciliation Services as follows:

1. A controversy exists between the above-named spouses, and the aid of the Court is requested to effect a reconciliation or an amicable settlement of such controversy.

2. The PETITIONER fully understands that this Petition may not be withdrawn from Conciliation Services until the minimum required conferences have been concluded, or the Court for good cause terminates proceedings.

3. To the best of my knowledge, there (IS) (IS NOT) a domestic relations action (Annulment, Legal Separation, or Dissolution of Marriage) pending between the spouses.

4. There (HAS) HAS NOT) been a Petition for Conciliation filed previously in this Court by either spouse.

5. **My** present address and telephone number is:

_____ Apt. _____ Home Telephone No. _____

_____ Zip. _____ Work Telephone No. _____

6. My **spouse's** present address and telephone number is:

_____ Apt. _____ Home Telephone No. _____

_____ Zip. _____ Work Telephone No. _____

7. The name and age of each minor child, including any stepchildren, whose welfare may be affected by the controversy is:

8. Do you or the other party need an interpreter: Yes or No If yes, what language: _____

WHEREFORE, your Petitioner prays this Court to make such order in respect to the conduct of the spouses and the subject matter of the controversy as the Court deems necessary and proper to effect a reconciliation of the spouses, or an amicable settlement of the controversies involved.

(Your Signature)

(Your Spouse's Attorney's Name)

(Your Attorney's Name)

(Address & Telephone Number)

(Address & Telephone Number)

ENTRIES ON THIS SIDE TO BE MADE BY CONCILIATION PERSONNEL ONLY

CASE NAME: _____

DR/FC/FN NO. _____ CS# _____ CNSLR _____

Prior Filings: _____

Extensions/Tolled: _____ Date Petition Filed: _____

Due To Terminate: _____

Petition filed by: (Circle One) Wife Judge Co-Pets Husband Actual Term. Date: _____

STATISTICAL RECORD
(To Be Filled In By Counselor)

Conciliation Sessions

<input type="checkbox"/>	1	Complete with Joint Conference
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<input type="checkbox"/>	2	Complete with No Joint Conference
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<input type="checkbox"/>	2-1	Order of Protection
<input type="checkbox"/>	2-2	Domestic Violence
<input type="checkbox"/>	2-3	Other

<input type="checkbox"/>	3	Reconciliation
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<input type="checkbox"/>	4	CS Petitioner No Show (or Not Seen)
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<input type="checkbox"/>	5	CS Respondent No Show (or Not Seen)
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<input type="checkbox"/>	6	Petition Withdrawn
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<input type="checkbox"/>	7	Petition Rejected (not accepted) or vacated
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<input type="checkbox"/>	8	1x30 (1 extension for 30 days)
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